

ARIZONA SUPREME COURT

Administrative Office of the Courts Defensive Driving Program 1501 W. Washington, Suite 104 Phoenix, Arizona 85007

Defensive Driving Instructor Renewal Form

Instructors must file this application with all required supporting documentation no later than November 30th of each renewal year.

Applicant Information

Legal Name:						
(Legal) Last Name	First Name		Middle Name			
Home Address: Physical Street Address (may not be a P.O. box):						
(Street)	(City)	(St)	(Cnty)	(Zip)		
School Name:						
Business Address: Physical Street Address (may not be a P.O. box):						
(Street)	(City)	(St)	(Cnty)	(Zip)		
Home Telephone Number :	Fax Number: Busin		Business P	ness Phone Number:		
()	()		()			
Personal Internet Address:						

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Background Information

Since you last renewed your certification:

(This is a required question. You MUST provide a response.)

- (1) Have you committed fraud, dishonesty, corruption, or material misrepresentation in applying for a certificate or on a certificate examination in this state or any other state;
- (2) Do you currently have a record of conviction by judgment of a felony or any offense involving moral turpitude;
- (3) Are you currently on probation, parole, or community supervision for a felony offense or named in an outstanding warrant;
- (4) Is there any pending action against your certificate that could result in suspension or revocation;
- (5) Have you had any occupational or professional license denied, revoked or suspended;
- (6) Have you had any complaint or disciplinary action made or taken against your instructor certificate (e.g. reprimand, censure, sanction, fine or other penalty) in any state;
- (7) Have you been found civilly liable in an action involving fraud, misrepresentation, material omission, misappropriation, theft or conversion;
- (8) Have you received a criminal traffic violation of any kind;
- (9) Have you received and/or been found responsible for any civil traffic moving violations; or
- (10) Has your license to drive been suspended or revoked, refused, canceled, issued conditionally or been placed on a probationary status.

\sqcap Yes \sqcap No

If you have answered "Yes" to the section above:

If you answer "Yes," please **provide** written explanation; where the finding, violation or conviction occurred and the nature and details of the case, including the case disposition, court, and case number and all other relevant information. List all incidents, include any incidents that may be pending and/or in litigation.

Failure to provide a written statement may result in the delay of processing your application for renewal, expiration of your certificate, or denial of your application for renewal.

PLEASE SUBMIT A CURRENT 39 MONTH MOTOR VEHICLE RECORD WHICH INCLUDES THE PRECEDING 12 MONTHS.

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Continuing Education:

Applicant Continuing Education Information:						
Since your last renewal certification: (This is a required question. You MUST provide a response.) (1) Have you completed the required minimum 6 hours of approved training or obtained a permission/waiver from the Defensive Driving Program Manager for not considering this requirement during this renewal period?	□ Yes					
If you have answered "No" to the section above:						
Provide complete written documentation, including all relevant deta	ails, explaining why.					
All instructors must provide documentation for at least 6 hours of approved education or obtain a waiver, prior to renewal.						
Registration forms indicating you have signed up for continuing education activities are NOT acceptable documentation; proof of attendance is required.						
Programs or classes NOT pre-approved by the Defensive Driving Program may be rejected. However, it does not in any way diminish your responsibility to comply with the continuing education requirement.						
Applicant Teaching Requirement Information:						
Since your last renewal certification: (This is a required question. You MUST provide a response.) (1) Have you taught a minimum of 6 classes, either in classroom or online, or obtained a permission/waiver from the Defensive Driving Program Manager for not considering this requirement during this renewal period?	□ Yes					
If you have answered "No" to the section above:						
Provide complete written documentation, including all relevant details, explaining why.						
All instructors must provide documentation for having taught at least 6 classes or obtain a waiver, prior to renewal.						

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Authorization, Release, Oath and Affirmation

I swear and affirm that I am not currently employed as a volunteer or paid employee of any court in any capacity including as a probation officer or probation department employee. I am aware of all Supreme Court requirements for defensive driving classes as stated in Arizona Code of Judicial Administration §§ 7-201 and 7-205 and I affirm that all classes conducted by me will comply with these requirements. I agree that the Defensive Driving Program may obtain, release and discuss all records concerning my prior or current defensive driving program certification with any certified defensive driving school or applicant school.

Having filed this application, I hereby consent to having an investigation made of my moral character, professional reputation, and fitness for instructor certification. I agree to give any further information which may be required in reference to my past or current record.

I also authorize and request every person, firm, company, corporation, governmental agency, court or institution having control of any documents, records, and other information including documents, records, charges or complaints filed against me, formal or informal, pending or closed, or any other pertinent data, to permit the Defensive Driving Program, or any of its agents or representatives to inspect and make copies of such documents, records, and other information.

I release, discharge, and exonerate the Defensive Driving Program, its agents and representatives, the State of Arizona, and any person furnishing information pursuant to this Authorization and Release from all liability which may arise from the investigation made by the Defensive Driving Program.

I understand willful omission or misrepresentation of any fact required to be disclosed in this application or any accompanying statement is a ground for refusing to issue or renew a certificate or for revoking a certificate.

I acknowledge that I have read this application form and that all statements are true and complete to the best of my knowledge and belief and that my Authorization and Release is freely given.

I declare under penalty of perjury under the laws of the State of Arizona that the foregoing is true and correct.

Instructor:		
Date:	Certification Number:	

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AFFIDAVIT OF VERIFICATION

Single A	Acknowledg	gment	
THE STATE OF ARIZONA, COUNTY O	F		
Before me, the undersigned authority, on this known to me to be the person whose na acknowledged to me that he/she executed the facts detailed are true.	me is subs	cribed to the fore	going instrument, and
Given under my hand and seal of office on	this	day of	, 20
Notary Public, State of Arizona			
Notary's Name Printed	M	y Commission Expire	S
Defensive Driving Program Use Only			
Reviewed By:		Date:	
Approved for Recertification:			
If denied, reason for denial:			
Held for:		Date:	
		Cleared:	